

Annual Statement/Performance  
and Evaluation Report

Part I: Summary  
Comprehensive Grant Program (CGP)

U.S. Department of Housing  
and Urban Development  
Office of Public and Indian Housing

OMB Approval No. 2577-0157 (Exp. 7/31/95)

HA Name FAIRFAX COUNTY REDEVELOPMENT AND HOUSING AUTHORITY	Comprehensive Grant Number VA39P010709	FFY of Grant Approval 2000
---	---	-------------------------------

Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement/Revision Number Performance & Evaluation Report for Program Year Ending Final Performance & Evaluation Report


Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost (2)	
		Original	Revised(1)	Obligated	Expended
1	Total Non-CGP Funds				
2	1408 Management Improvements	\$136,165			
3	1410 Administration	\$136,282			
4	1411 Audit				
5	1415 Liquidated Damages				
6	1430 Fees and Costs	\$40,000			
7	1440 Site Acquisition				
8	1450 Site Improvement	\$85,000			
9	1460 Dwelling Structures	\$945,395			
10	1465.1 Dwelling Equipment-Nonexpendable				
11	1470 Nondwelling Structures				
12	1475 Nondwelling Equipment				
13	1495.1 Relocation Costs				
14	1490 Replacement Reserve				

15	1502 Contingency (may not exceed 8% of line 16)	\$19,987			
16	Amount of Annual Grant (Sum of lines 2-15)	\$1,362,829			
17	Amount of line 16 Related LBP Activities				
18	Amount of line 16 Related to Section 504 Compliance				
19	Amount of line 16 Related to Security				
20	Amount of line 16 Related to Energy Conservation Measures				

(1) To be completed for Performance and Evaluation Report or a Revised Annual Statement. (2) To be completed for the Performance and Evaluation Report.

Signature of Executive Director and Date X	Signature of Public Housing Director/Office of Native American Programs Administrator and Date X
---	---

**Annual Statement/  
Performance and Evaluation**  
**Part II:** Supporting Pages  
Comprehensive Grant Program (CGP)

**U.S. Department of Housing  
and Urban Development**  
Office of Public and Indian  
Housing

OMB Approval No. 2577-0157 (Exp. 7/31/95)

Development t Number/ Name HA - Wide Activities	General Description of Major Work Categories	Developmen t Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
VA-19-30  <b>GREENWOOD</b>	REPLACE ROOFING	1460		\$264,780				
	REPLACE GUTTERS AND DS	1460		\$15,925				
	REPLACE HOT WATER HEATERS	1460		\$17,000				
	REPLACE SITE LIGHTING	1450		\$85,000				
	<b>TOTAL</b>			<b>\$383,705</b>				
VA-19-25 <b>VILLAGES OF FALLS CHURCH</b>	REPLACE DISHWASHERS	1460		\$15,120				
	INSTALL TUB LINERS	1460		\$14,400				
				\$64,800				
	REPLACE KIT. CABINETS	1460						
	REPLACE WCS=	1460		\$11,700				
	REPLACE APPLIANCES	1460		\$43,645				
	REPLACE HVAC UNITS	1460		\$112,320				
	<b>TOTAL</b>			<b>\$261,985</b>				
VA-19-31  <b>BRIARCLIFF</b>	INSTALL LOCKS	1460		\$11,250				
	REPLACE KIT. CABINETS	1460		\$52,500				
	REPLACE APPLIANCES	1460		\$ 33,825				
	REPLACE T-111	1460		\$120,000				
	REPLACE HVAC/HWH	1460		\$76,100				
	INSTALL CARPET	1460		\$50,250				
	REPAIR AND OVERLAY PARKING	1460		\$41,780				
	<b>TOTAL</b>			<b>\$ 385,705</b>				

Signature of Executive Director and Date

Signature of Public Housing Director/Office of Native American Programs Administrator and Date



**Annual Statement/  
Performance and Evaluation**  
**Part II:** Supporting Pages  
Comprehensive Grant Program (CGP)

**U.S. Department of Housing  
and Urban Development**  
Office of Public and Indian  
Housing

OMB Approval No. 2577-0157 (Exp. 7/31/95)

Development t Number/ Name HA - Wide Activities	General Description of Major Work Categories	Developmen t Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
PHA WIDE	2 ADMINISTRATIVE POSITION AND SUPPORT POSITION	1410		\$136,165				
PHA WIDE	FUND TWO MAINT. TURNAROUND POSITIONS	1408		\$46,392				
	COMPUTER UPGRADES AND SOFTWARE PACKAGE	1408		\$89,890				
PHA WIDE	CONTINGENCY	1502		\$19,987				
	A&E AND PRINTING	1430		\$40,000				

(1) to be completed for Performance and Evaluation Report or a Revised Annual Statement. (2) To be completed for the Performance and Evaluation Report.

Signature of Executive Director and Date

Signature of Public Housing Director/Office of Native American Programs Administrator  
and Date



